

Please type a plus sign (+) inside box

-3-01

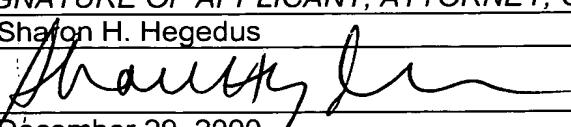
**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

- | | |
|---|---|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (<i>attached hereto in duplicate</i>)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 10]
<i>(Preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure <p>3. <input type="checkbox"/> Drawing(s)(35 USC 113) [Total Sheets]</p> <p>4. Oath or Declaration</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Unexecuted original c. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
<i>(for continuation/divisional check boxes 5 and 16)</i> <p>i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u>
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation by Reference
<i>(useable if Box 4c is checked)</i>
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>16. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:
Amend the specification by inserting before the first line: -- This is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional
<input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed --
of the prior application before calculating the filing fee.</p> <p>17. For this divisional application, please cancel original Claims</p> | <p>Attorney Docket No. MCP-0262</p> <p>First Named Inventor or Application Identifier
Frank J. Bunick</p> <p>Express Mail Label No. EL457887297US</p> <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement
<i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i></p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i></p> <p>15. <input type="checkbox"/> Other:</p> |
|---|---|

18. CORRESPONDENCE ADDRESS	
<input type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence Address below	
Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA	
19. TELEPHONE CONTACT	
Please direct all telephone calls or telefaxes to Sharon H. Hegedus at:	
Telephone: (732) 524-2242 Fax: (732) 524-2808	
19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Sharon H. Hegedus
SIGNATURE	
DATE	December 29, 2000

FEE TRANSMITTAL*Complete if Known*

Application Number	
Filing Date	
First Named Inventor	Frank J. Bunick
Group Art Unit	
Examiner Name	
Attorney Docket Number	MCP-0262

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00/152890
12/29/00

FEE CALCULATION

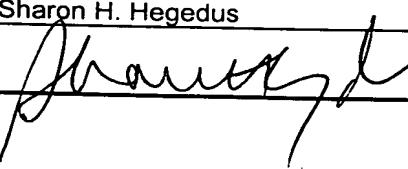
CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	13 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 710.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/MCP-0262/SHH in the amount of \$710.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/MCP-0262/SHH. Three copies of this sheet are enclosed.

SUBMITTED BY:

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Sharon H. Hegedus	Reg. No. 33,058
Signature		Date: 12/29/00 Deposit Account No. 10-0750

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant: Bunick & Luber

For : Soft Tablet Containing Dextrose Monohydrate

10914 U.S. PRO
09/752899
12/29/00



Express Mail Certificate

"Express Mail" mailing number: EL457887297US

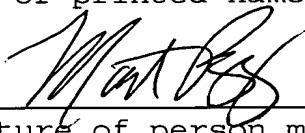
Date of Deposit: December 29, 2000

I hereby certify that this complete application, including specification pages, claims, and Information Disclosure Statement, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Martin Rizzi

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)